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PPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION N		
10/734,645	12/15/2003	Todd A. Kuhn	2030.0030001/EJK	9037		
	90 10/25/2004		EXAM	EXAMINER		
STERNE, KESSLER, GOLDSTEIN & FOX PLLC 1100 NEW YORK AVENUE, N.W.			RICCI, JOHN A			
WASHINGTON			ART UNIT	PAPER NUMBER		
			3714			
		DATE MAILED, 10/25/2004				

Please find below and/or attached an Office communication concerning this application or proceeding.

	Application No.	Applicant(s)	
Interview Summary	10/734,645	KUHN, TODD A.	
morrion ouninary	Examiner	Art Unit	-
	John Ricci	3714	
All participants (applicant, applicant's representative, PT	O personnel):	· .	
(1) <u>John Ricci</u> .	(3)		
(2) <u>Ed Kessler</u> .	(4)		
Date of Interview: <u>28 July 2004</u> .	<u> </u>		
Type: a)☐ Telephonic b)☐ Video Conference c)☑ Personal [copy given to: 1)☐ applicant	2)⊠ applicant's repre	sentative]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e)⊠ No.		
Claim(s) discussed: <u>1</u> .			
Identification of prior art discussed: Martinez.		•	
Agreement with respect to the claims f)⊠ was reached.	g)☐ was not reached.	h)□ N/A.	•
Substance of Interview including description of the gener reached, or any other comments: <u>Claims would define over torque on arrow head</u> .	al nature of what was a <u>ver Martinez if claimed t</u>	greed to if an agreement wa hat airfoil shape produces r	as <u>otational</u>
(A fuller description, if necessary, and a copy of the amer allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attach	copy of the amendmen	niner agreed would render t its that would render the cla	the claims iims
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN ONE MONTH FROM THIS INTERVIEW DATE, OFFICE A STATEMENT FORM, WHICHEVER IS LATER, TO FILE A STATEMENT Summary of Record of Interview requirements on reverse	he last Office action has R THE MAILING DATE T OF THE SUBSTANCI	already been filed, APPLIC OF THIS INTERVIEW SUN E OF THE INTERVIEW Se	CANT IS
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		In pri	
Examiner Note: You must sign this form unless it is an Attachment to a signed Office action.	Examina	er's signature if required	